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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	MET095.233410
First Named Inventor	Shlomo BEN-HAIM
COMPLETE IF KNOWN	
Application Number	10/561,491
Filing Date	December 20, 2005
Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned

I hereby declare that:

Each Inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

GASTROINTESTINAL METHODS AND APPARATUS FOR USE IN TREATING DISORDERS

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) 20 June 2004 as United States Application Number or PCT InternationalApplication Number PCT/IL2004/000650 and was amended on (MM/DD/YYYY) 12/20/2005 (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.55, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(b) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

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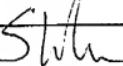
DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	<input checked="" type="checkbox"/> The address associated with Customer Number: <input type="text" value="54042"/>	OR <input type="checkbox"/> Correspondence address below
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
Given Name (first and middle if any) Shlomo		Family Name or Surname BEN-HAIM	
Inventor's Signature 		Date 30/5/06	
Residence: City Caesarea	State	Country Israel	Citizenship Israel
Mailing Address 8 Efroni Street			
City Caesarea	State	Zip 38900	Country Israel

Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

DECLARATION		ADDITIONAL INVENTOR(S)
		Supplemental sheet
		Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Shai		POLOCKER	
Inventor's Signature: <i>N. Shai</i>		Date: 3/15/06	
Residence: City Mosheh Zur Mowha	State	Israel Country	Israel Citizenship

Mailing Address			
Mosheh Zur Mowha City	State	42810 Zip	Israel Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	

Ricardo		AVV	
Inventor's Signature: <i>Ricardo Avv</i>		Date: 3/15/06	
Haifa	State	Israel Country	Israel Citizenship
Residence: City			

1171 Sufot Street			
Mailing Address			
Haifa City	State	34525 Zip	Israel Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	

Given Name (first and middle (if any))		Family Name or Surname	
Ofer		GLASSERG	
Inventor's Signature: <i>Ofer</i>		Date: 3/15/06	
Haifa	State	Israel Country	Israel Citizenship
Residence: City			

5 Ferog Street			
Mailing Address			
Haifa City	State	32447 Zip	Israel Country

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DECLARATION		ADDITIONAL INVENTOR(S)	
		Supplemental Sheet	
		Page 1 _____ of 1	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Tami		HAREL	
Inventor's <i>Signature</i>	<i>Tami</i>		Date <i>15-12-06</i>
Residence: City	Haifa	State	Israel Country
6 Hatzolet Street			
Mailing Address			
Haifa		34862	Israel Country
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ophir		BITTON	
Inventor's <i>Signature</i>	<i>Ophir</i>		Date <i>08-06-06</i>
Residence: City	Zichron Yaacov	State	Israel Country
1 Hadvora Street			
Mailing Address			
Zichron Yaacov		30900	Israel Country
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Benny		ROUSSO	
Inventor's <i>Signature</i>	<i>Benny</i>		Date <i>21/6/06</i>
Residence: City	Rishon le Zion	State	Israel Country
12 Henry Bergsovel Street, Kiriat Hatanei Nobel, Rishon le Zion 35935			
Mailing Address			
Rishon le Zion		35935	Israel Country
City	State	Zip	Country

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